

Section 1—Instructions for completing the Contract Compliance and Business Enterprise Certification Application

All contractors, including subcontractors, who are party to a **contract** as defined in Columbus City Code section 3901.01, must hold a valid contract compliance certification number.

1-1 General Information and Instructions

- **Definitions for words in black bold can be found in Section 3**
- Indicate "N/A", meaning "not applicable" on all unanswered questions.
- A incomplete submission will delay the processing of your application and may affect your company's eligibility to be awarded a contract.
- The City of Columbus reserves the right to request additional information as a means of verifying application information.
- The application and supporting materials are considered confidential.
- Prior to submission, please review application for data entry errors.

1-2 Additional Information and Instructions for Employees Information and Employment Practices (Sections 2-2 & 2-3)

Under Section 2-2 (*Employees Information*) of the application, be sure to report the total number of all employees (permanent full-time, part-time, apprentices and on-the-job trainees). In addition, no person should be counted in more than one race/ethnic group.

Completing the application's Employment Practices section (2-3) will assist you in obtaining a **Contract Compliance Number**. All contractors, including subcontractors, who are party to a contract as defined in Columbus City Code section 3901.01, must hold a valid contract compliance certification number.

A Contract Compliance Number is active for one year from the date it is assigned.

1-3 Additional Information and Instructions for Business Enterprise Certification (Section 2-5)

Participants in the State of Ohio EDGE program should not complete Section 2-4. Instead, contact the Equal Business Opportunity Commission Office for special instructions.

It is the City of Columbus' policy to provide minority/female businesses the maximum practicable opportunity to participate in City **contracts**. Maintaining a list of available and capable minority/female businesses is a key aspect of putting this policy into practice. Certification is voluntary. However, all minority/female firms are encouraged to become certified.

Certification confirms a company's minority/female status before it is placed in our widely distributed minority/female business directory. If you are a minority/female-owned business, you may become a Certified Business Enterprise by completing Section 2-4.

In order to become a Certified Business Enterprise, a business must:

- a) be at least 51% owned by one or more **eligible racial minority**; and
- b) be managed and controlled by the **eligible racial minority** seeking to be certified; and
- c) have been in business in the **Columbus MSA** for at least three (3) months, and
- d) have annual sales which for any two consecutive year periods do not exceed the average sales for its industry, and
- e) have a place of business located within the City of Columbus corporation limits.

Upon receipt of a complete application, certification applicants are advised of their determined **eligible racial minority** status within thirty (30) working days. This period may be extended to accommodate an applicant's availability for an onsite visit.

In addition to completing Section 2-4, applicants seeking to become certified will undergo an onsite visit by the Equal Business Opportunity Commission Office.

1-4 Do you need further assistance?

Please call the Equal Business Opportunity Commission Office at (614) 645-4764 during the hours of 8am-5pm, Monday-Friday.

Section 2—Application for Contract Compliance and Business Enterprise Certification

2-1 General Business Information

Applicant Name

Street

City State Zip+4

Telephone Fax

Mailing Address, if different than above:

Street

City State Zip+4

Employer Identification Number (EIN)

D-U-N-S® Number

Social Security Number (Provide only if applicant is a sole proprietorship)

2-1a. List business names under which applicant does, or has done, business

2-1b. What date was your business started?

2-1c. What is your fiscal year? to

2-1d. What is your legal structure?

Please select only one answer.

2-1e. Last fiscal year's gross annual sales?

2-1f. Describe the main products or services you provide

2-1g. Whom should we contact to answer questions about overall business operations?

Contact E-mail Address

Telephone Fax

2-1h. Provide Information About Business Owners and Principals

| Name | Title | Gender | Race Select only one. | % of Ownership and Control |
|------|-------|--------|-----------------------|----------------------------|
| | | | | |
| | | | | |
| | | | | |

2-2 Employees Information *(No person should be counted in more than one race/ethnic group)*

Click here to see classification descriptions.

As of what date was this count taken? _____

| Job Classification | Total Employees | Male | | | | | Female | | | | |
|----------------------------|-----------------|----------|-------|-------|----------|-------|----------|-------|-------|----------|-------|
| | | Am. Ind. | Asian | Black | Hispanic | White | Am. Ind. | Asian | Black | Hispanic | White |
| Officials & Managers | | | | | | | | | | | |
| Professionals | | | | | | | | | | | |
| Technicians | | | | | | | | | | | |
| Administrative and Support | | | | | | | | | | | |
| Skilled CraftWorkers | | | | | | | | | | | |
| Laborers (Unskilled) | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| Total | | | | | | | | | | | |

How many of your employees reside in the **Columbus Metropolitan Statistical Area?** _____

2-3 Employment Practices

2-3a. Equal Employment Opportunity Practices

Does applicant conspicuously post its EEO Policy?

Is EEO policy available to current and prospective employees?

Does applicant state that it is an Equal Opportunity

Employer in employment ads and solicitations?

Has applicant notified all of its hiring sources that its considers for employment all qualified applicants without regard to race, color, religion, sex, national origin, or ancestry?

Does the applicant use subcontractors?

Does the applicant include the Equal Employment Opportunity Clause within its subcontractors' contracts or purchasing orders?

Has the applicant notified its subcontractors in writing that they are required to comply with the city's Equal Employment Opportunity?

2-3b. List any EEO or Contract Compliance Reviews that you have undergone. If none, check this box

(1) Agency Name Type of Review

Year of Review In Compliance?

(2) Agency Name Type of Review

Year of Review In Compliance?

(3) Agency Name Type of Review

Year of Review In Compliance?

2-3c. Explain any situations in which the applicant is prohibited from doing business with any governmental agency. (Give reason, agency name, period of disbarment or suspension, etc.) If none, check this box

2-3d. List the employee organizations that have a bargaining agreement with the applicant. If none, check this box

(1) Name of Organization

(2) Name of Organization

(3) Name of Organization

2-4 To Become a Certified Business Enterprise

Fill out this Section 2-4 only if you wish to become a Certified Business Enterprise.

2-4a. What type of minority Certification is being requested. Please mark all that apply.

2-4b. How was your business started?

Please mark all that apply.

2-4c. Provide the address of all offices and buildings, if other than indicated in Section 2-1

(1) Street

City State Zip+4

(2) Street

City State Zip+4

(3) Street

City State Zip+4

2-4d. Provide information about persons who are responsible for the day-to-day management and policy decision-making of the company’s key business actions.

| | Name | Title | Gender | Race | Holds Position With Another Firm? |
|--|------|-------|--------|------|-----------------------------------|
| Making financial decisions | | | | | |
| Signing of checks | | | | | |
| Payroll | | | | | |
| Purchasing | | | | | |
| Other | | | | | |
| Estimating | | | | | |
| Sales/marketing | | | | | |
| Hiring/firing of management personnel | | | | | |
| Purchasing major supplies and products | | | | | |
| Supervision of field operations | | | | | |
| Negotiating/signing contracts | | | | | |
| Acquiring credit | | | | | |
| Making management decisions | | | | | |
| Negotiating and scheduling bids | | | | | |
| Managing office staff and workflow | | | | | |
| Securing bonding or insurance | | | | | |
| Managing operations | | | | | |

2-4e. Provide information on current business relationships with non-minority firms.

| Firm Name and Address | Owner and Title | Relationship | | | | |
|-----------------------|-----------------|---------------|---------------------|-------|------------------|---------------|
| | | Joint Venture | Exclusive Agreement | Lease | Employee Sharing | Other Specify |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |

2-4f. Certification Record

a. List current Minority Business Enterprise certifications you hold. If none, check this box

| | | | |
|--------------------|----------------|--------------------|----------------|
| (1) Name of Agency | Date Certified | (2) Name of Agency | Date Certified |
|--------------------|----------------|--------------------|----------------|

b. If you have been denied a Minority Business Enterprise certification, please list denying agency. If none, check this box .

| | | | |
|--------------------|----------------|--------------------|----------------|
| (1) Name of Agency | Date Certified | (2) Name of Agency | Date Certified |
|--------------------|----------------|--------------------|----------------|

c. List the names of agencies that have refused to certify any **eligible racial minority** principal of your company. If none, check this box

| | | | |
|--------------------|-------------|--------------------|-------------|
| (1) Name of Agency | Date Denied | (2) Name of Agency | Date Denied |
|--------------------|-------------|--------------------|-------------|

Section 3—Definitions and Resources

This section explains the meaning of key words and documents. In addition, it directs you to other resources that can assist you in submitting a complete and accurate application.

3-1 Definitions: Understanding terms used in this packet

American Indian or Alaskan Native: All persons having origins in any of the original people of North America who maintain cultural identification through tribal affiliation or community recognition.

Applicant: The legal name of the entity or individual applying for the Contract Compliance Number or the Business Enterprise Certification.

Asian Business Enterprise (ABE): A business that is an independent and continuing operation for profit. It performs a commercially useful function. Also it is at least 51% owned and controlled by at least one person of Asian descent who is a United States citizen.

Asian or Pacific Islander: A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands.

Black (not Hispanic origin): A person having origins in any of the Black racial groups of Africa.

Columbus Metropolitan Statistical Area (MSA): The geographic boundaries of Columbus, Ohio along with adjacent communities that comprise the Ohio counties of Franklin, Delaware, Fairfield, Fayette, Licking, Madison, Pickaway and Union.

Contract: In general, a binding agreement between the city of Columbus and some other party. As applicable to contract compliance requirements, please see Columbus City Code section 3901.01.

Contract Compliance Number: A number assigned by the City of Columbus Equal Business Opportunity Commission Office to companies that seek to do business with the City.

D-U-N-S® Number: A unique nine-digit identification sequence created by Dun and Bradstreet that is recognized as the universal standard for identifying and keeping track of a business.

Eligible Racial Minority: Persons who are American Indian, Alaskan Native, Asian, Black, Female, Hispanic or Pacific Islander.

Employer Identification Number (EIN): A nine-digit number assigned by the Internal Revenue Service to sole proprietors, corporations, partnerships, and other entities for tax filing and reporting purposes.

Female Business Enterprise (FBE) (as defined by Title 39 of the Columbus City Codes): A business that is an independent and continuing operation for profit. It performs a commercially useful function. Also it is at least 51% owned and controlled by at least one female who is a United States citizen and of non-African-American descent.

Hispanic Business Enterprise (HBE): A business that is an independent and continuing operation for profit. It performs a commercially useful function. Also it is at least 51% owned and controlled by at least one person of Hispanic descent who is a United States citizen.

Minority Business Enterprise (MBE) (as defined by Title 39 of the Columbus City Codes): A business that is an independent and continuing operation for profit. It performs a commercially useful function. Also it is at least 51% owned and controlled by at least one eligible racial minority who is a United States citizen.

3-2 Resources: Internet assistance in understanding terms and documents

Columbus City Code-Title 39

<http://municipalcodes.lexisnexis.com/codes/columbus/>

D-U-N-S® Number

http://www.dnb.com/US/duns_update/

Employer Identification Number (EIN)

<http://www.irs.gov/businesses/small/article/0,,id=102767,00.html>

Map of Columbus Statistical Metropolitan Areas

http://go.owu.edu/~rdfusch/columbus_msa_townships2.jpg